BIRT, STEWART, KOLASCH & BEH, LLP

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INTELLECTUAL PROPERTY LAW

8110 GATEHOUSE ROAD
SUITE 500 EAST
FALLS CHURCH, VA 22042-1210
USA

(703) 205-8000

FAX: (703) 205-8050 (703) 698-8590 (G IV)

e-mail: mailroom@bskb.com web: http://www.bskb.com

CALIFORNIA OFFICE COSTA MESA, CALIFORNIA SCOTT L. LOWE
PAUL C. LEWIS
RICHARD J. GALLAGHER
JAYNE M. SAYDAH*
MARYANNE ARMSTRON
KECIA J. REYNOLDS
ROBERT L. SCOTT, II
KALPANA REDDY
MARK E. OLDS
ESTHER H. CHONG
CATHERINE M. VOISINET*
EUGENE T. PEREZ

REG. PATENT AGENTS:
FREDERICK R. HANDREN
MAKI HATSUMI
CRAIG A. MCROBBIE
GARTH M. DAHLEN, PH.D.
ROBERT E. GOOZNER, PH.D.
KRISTI L. RUPERT, PH.D.
MATTHEW T. SHANLEY
SUSAN W. GORMAN, PH.D.
DAVID J. CHO
ROBERT W. DOWNS

OF COUNSEL:
HERBERT M. BIRCH (1905-1996)
ELLIOT A. GOLDBERG*
WILLIAM L. GATES*
EDWARD H. VALANCE
RUPERT J. BRADY (RET.)*
F. PRINCE BUTLER
FRED S. WHISENHUNT
JAMES W. HELLWEGE

*ADMITTED TO A BAR OTHER THAN VA.

JOE MCKINNEY MUNCY ROBERT J. KENNEY JOHN W. BAILEY MARK J. NUELL, PH.D. JAMES T. ELLER, JR. D. RICHARD ANDERSON

Date: <u>November 29, 2001</u> Docket No.: <u>0662-0163P</u>

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

_sir:

Transmitted herewith for filing is the patent application of

⊨Inventor(s): SHIN, Joon Shik

KIM, Sang Tae; HAN, Yong Nam

For:

USE OF HARPAGID-RELATED COMPOUNDS FOR PREVENTION AND TREATMENT OF OSTEOPOROSIS, ARTHRITIS AND RUPTURED DISC AND

PHARMACEUTICAL COMPOSITION CONTAINING THE SAME

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| |

| <u>X</u> | A specification consisting of <u>43</u> pages | | | | | | | | | |
|----------|---------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|
| <u>X</u> | 27 sheet(s) of FORMAL drawings | | | | | | | | | |
| _X_ | An assignment of the invention - \$40.00 Recording Fee | | | | | | | | | |
| <u>X</u> | Certified copy of Priority Document(s) | | | | | | | | | |
| <u>X</u> | Executed Declaration X Original Photocopy | | | | | | | | | |
| <u>X</u> | Applicant claims small entity status in accordance with 37 CFR 1.27 | | | | | | | | | |

Application Data Sheet in accordance with 37 C.F.R. 1.76

| | | | | | | C | 0662-0163 | P |
|-------------------------------------------------------------|----------------------------------------------|-----------------------------|-------------------------------------|-------------------|----------------------|-----------|----------------------|----------|
| _ | Prelimir | nary Amendmer | nt | | | | | |
| _ | Informat | tion Disclosu | ıre Statemer | nt, PTO- | -1449 and | l re | eference(| s) |
| _ | Other | | | | | | | |
| _ | Applicar | nt requests e | early public | cation | | | | |
| 7 | The filing fo | ee has been o | calculated a | as shown | n below: | | | |
| | | | | LARGE | ENTITY | | SMALL EN | TITY |
| **** | FOR | NO. FILED | NO. EXTRA | RATE | FEE | | RATE | FEE |
| T. H. H. H. T. M. M. H. | BASIC FEE | ********* | ***** | **** | \$740.00 | or | **** | \$370.00 |
| | TOTAL CLAIMS | 3 - 20 = | 0 | x18 =\$ | 0.00 | or | x 9 = \$ | 0.00 |
| | INDEPENDENT | 3 - 3 = | 0 | x84 =\$ | 0.00 | or | x 42 = \$ | 0.00 |
| | MULTIPLE DEPENDENT CLAIM PRESENTED <u>no</u> | | | +280 = | \$ 0.00 | or | +140 = \$ | 0.00 |
| | | | | TOTAL \$ | 0.00 | | TOTAL \$ | 370.00 |
| | X A chec record | k in the amo ing fee (if | unt of \$ <u>410</u> applicable) | .00 is enc | to cover losed. | th | e filing | fee and |
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| | No fee | is enclosed | • | | | | | |
| | Р | lease send c | orresponden | ce to: | | | | |
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BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 2292 P.O. Box 747 Falls Church, VA 22040-0747 Telephone: (703) 205-8000

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. 1.16 or under 37 C.F.R. 1.17; particularly, extension of time fees.

Respectfully submitted,

BIRCH, STEWART, KOLASCH & BIRCH, LLP

JOSEPH A. KOLASCH

Reg. No. 22,463 P. O. Box 747

Falls Church, Virginia 22040-0747

(703) 205-8000 (AK/sll